

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	SF		11-29-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	sh	1115	12, 11, 01
RESPONSE FORMALITY REVIEW	Abn.	0316811	11/05/03

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/27/05
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

03/6/37
 11-06-03